

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective January 1, 2003

Application or Docket Number

*10/643134*

**CLAIMS AS FILED - PART I**

|   | (Column 1)   | (Column 2)   |
|---|--------------|--------------|
| TOTAL CLAIMS  |              |              |
| FOR   | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | minus 20=    | <i>20</i>    |
| INDEPENDENT CLAIMS  | minus 3 =    | <i>3</i>     |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |              |              |

SMALL ENTITY  
TYPE ☐

OR OTHER THAN  
SMALL ENTITY

| RATE      | FEE   |
|-----------|-------|
| BASIC FEE | \$375 |
| XS 9=     |       |
| X42=      |       |
| +140=     |       |
| TOTAL     |       |

| RATE      | FEE       |
|-----------|-----------|
| BASIC FEE | \$750     |
| XS18=     | <i>20</i> |
| X84=      | <i>3</i>  |
| +280=     |           |
| TOTAL     |           |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

*1-21/05*

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | <i>14</i>                        | Minus <i>20</i>                    | = <i>-</i>    |
| Independent   | <i>2</i>                         | Minus <i>3</i>                     | = <i>-</i>    |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

| RATE  | ADDITIONAL FEE |
|-------|----------------|
| XS 9= |                |
| X42=  |                |
| +140= |                |
| TOTAL |                |

| RATE  | ADDITIONAL FEE |
|-------|----------------|
| XS18= |                |
| X84=  |                |
| +280= |                |
| TOTAL |                |

*2-10-05*

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | *                                | Minus                              | =             |
| Independent   | *                                | Minus                              | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE  | ADDITIONAL FEE |
|-------|----------------|
| XS 9= |                |
| X42=  |                |
| +140= |                |
| TOTAL |                |

| RATE  | ADDITIONAL FEE |
|-------|----------------|
| XS18= |                |
| X84=  |                |
| +280= |                |
| TOTAL |                |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | *                                | Minus                              | =             |
| Independent   | *                                | Minus                              | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE  | ADDITIONAL FEE |
|-------|----------------|
| XS 9= |                |
| X42=  |                |
| +140= |                |
| TOTAL |                |

| RATE  | ADDITIONAL FEE |
|-------|----------------|
| XS18= |                |
| X84=  |                |
| +280= |                |
| TOTAL |                |

AMENDMENT D FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3

\*\* If the Highest Number Previously Paid For (in this SPACE) is less than 20, enter "20"

\*\*\* If the Highest Number Previously Paid For (in this SPACE) is less than 3, enter "3"

† The Highest Number Previously Paid For (if none independent, is the highest number paid for the application, the box at the

**Best Available Copy**